

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

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1. Entity Name

PILGRIM REST FREE WILL BAPTIST CHURCH, INC.



Principal Place of Business

**1047 N. OHIO AVE.
LAKELAND FL 33805**

Mailing Address

**1047 N. OHIO AVE.
LAKELAND FL 33805**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1131441**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**COLEMAN, F T
1047 N OHIO AVE
LAKELAND FL 33805**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PC	☐ Delete
NAME	COLEMAN, F T	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	T	☐ Delete
NAME	WILLIS, EARLINE	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	T	☐ Delete
NAME	BAKER, DAVID	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	VP	☐ Delete
NAME	RISHER, MELVIN	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL 33805	
TITLE	S	☒ Delete
NAME	BRYANT, MYRA J	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL 33805	
TITLE	T	☐ Delete
NAME	HORNE, MARY	
STREET ADDRESS	1047 N OHIO AVE	
CITY-ST-ZIP	LAKELAND FL 33805	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☒ Change ☐ Addition
NAME	TYSON, EDDIE	
STREET ADDRESS	1047 N OHIO AV	
CITY-ST-ZIP	LAKELAND, FL 33805	
TITLE	S	☒ Change ☐ Addition
NAME	RILEY, JOYCE	
STREET ADDRESS	1047 N. OHIO AVENUE	
CITY-ST-ZIP	LAKELAND FL 33805	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF REGISTERED AGENT FRANK T. COLEMAN

4/10/03

863-688-3826

CR2E037 (10/02)